

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

5265 24

FILING DATE

AFFIDAVIT

10/58/2534

7/20/06 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/		51						
2		/		/		/	52						
3		/		/		/	53						
4		/		/		/	54						
5		/		/		/	55						
6		/		/		/	56						
7		/		/		/	57						
8		/		/		/	58						
9		/		/		/	59						
10		/		/		/	60						
11		/		/		/	61						
12		/		/		/	62						
13		/		/		/	63						
14		/		/		/	64						
15		/		/		/	65						
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18		/		/		/	68						
19		/		/		/	69						
20		/		/		/	70						
21		/		/		/	71						
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23		/		/		/	73						
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27		/		/		/	77						
28		/		/		/	78						
29		/		/		/	79						
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42		/		/		/	92						
43		/		/		/	93						
44		/		/		/	94						
45		/		/		/	95						
46		/		/		/	96						
47		/		/		/	97						
48		/		/		/	98						
49		/		/		/	99						
50		/		/		/	100						
TOTAL IND.	1	↓	1	↓	1	↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	9	←	19	←	19	←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	10		20		20		TOTAL CLAIMS						

PTO-1346 (REV. 9-83)

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